Return of Organization Exempt From Income Tax

DLN: 93493319089328 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www.irs.gov/form990

			lendar year, or tax year beginn C Name of organization	ing 01-01-2017 , and ending 12-	31-20)17					
	ck if app dress ch		MOZILLA FOUNDATION				DEMPIOY	er identi	fication number		
	me char	-					20-009	7189			
	tıal retu	_	Doing business as								
		terminated		_			E Telephor	ne numbe	r		
	ended r		Number and street (or P O box if mai 331 E EVELYN AVENUE	Il is not delivered to street address) Room/s	suite		·				
⊔ Ар	piication	n pending -	City or town, state or province, count	TID or foreign postal code			(650) 9	03-0800)		
			MOUNTAIN VIEW, CA 94041	ry, and ZIP or foreign postal code			•		20 506 446		
		L	F Name and address of numerical	- FF	1			•	20,586,446		
			F Name and address of principal MARK SURMAN	omcer	H(a group re	turn for			
			331 E EVELYN AVENUE		_,		linates? subordinat	·ec	□Yes ☑No		
T-1	, avamr	pt status	MOUNTAIN VIEW, CA 94041		⊣ '''	include			☐ Yes ☐No		
, la	k-exemp	pt status	✓ 501(c)(3)	nsert no)	╛				instructions)		
W	ebsite	::▶ WW\	W MOZILLA ORG		H((C) Group	exemption	number	· >		
						ear of forma	tion 2002	M State	of legal domicile CA		
(Forn	n of org	janization	Corporation Trust Associ	ation L Other >	- '	eai oi ioiilia	11011 2003	IN State	or legal dofflicile CA		
Pa	rt I	Sumn	narv								
			cribe the organization's mission or	most significant activities							
v				PUBLIC RESOURCE OPEN AND ACCES	SIBLE	TO ALL					
2	_										
<u> </u>	_										
GOVERNANCE	, .	heck this	hox > I if the organization disc	ontinued its operations or disposed of	more	than 25%	of its net a	ssets			
5				body (Part VI, line 1a)			or its rice a	3	8		
ğ	4 N	Number of	f independent voting members of t	the governing body (Part VI, line 1b)				4	6		
ACHVILLES &	5 ⊺	Total num	ber of individuals employed in cale	endar year 2017 (Part V, line 2a)				5	65		
<u> </u>			• •	essary)				6	10,000		
\{	l		·	VIII, column (C), line 12				7a	· · · · · · · · · · · · · · · · · · ·		
	l			Form 990-T, line 34				7b			
		Tet am ela	ned pasificos taxable filosific from			Prid	r Year	112	Current Year		
	ے وا	Contributi	ons and grants (Part VIII, line 1h)		ŀ		12,455,	200	9,841,565		
Ē	l		ervice revenue (Part VIII, line 2g)		-		8,493,				
Ravenua	l	-			ŀ				10,193,707 458,546		
œ.	l		nt income (Part VIII, column (A), li	·	-		353,:		· · · · · · · · · · · · · · · · · · ·		
	l		enue (Part VIII, column (A), lines 5		-		21,346,4		92,628 20,586,446		
				t equal Part VIII, column (A), line 12)					· · ·		
	l		d similar amounts paid (Part IX, co			2,333,		+			
			aid to or for members (Part IX, col	, ,,	-			0	0		
E		-		efits (Part IX, column (A), lines 5–10)	-		9,879,8				
Expenses	_		, , , ,	nn (A), line 11e)	-		32,0	000	10,670		
옰	l		nising expenses (Part IX, column (D), lin		-						
ш	l		enses (Part IX, column (A), lines 1	· · ·	-		9,047,	-+	9,323,608		
	l		enses Add lines 13–17 (must equa	, , , , , ,	-		21,293,	197	24,206,401		
	19 R	Revenue l	ess expenses Subtract line 18 from	m line 12			53,:		-3,619,955		
Net Assets of Fund Balances						Beginning	of Current Y	ear	End of Year		
a E] _0		to (Part V June 16)		F		24.645.6	200	32 410 950		
200	l		ts (Part X, line 16)		F		34,645,8		33,419,850		
<u> </u>	l		ities (Part X, line 26)		-		2,744,		3,145,473		
			or fund balances Subtract line 21	from line 20			31,901,	/3/	30,274,377		
	t II		ture Block	ned this return, including accompanyin	a sche	adules and	ctatement	s and to	the hest of my		
nowl	edge a	and belief		Declaration of preparer (other than of							
ıny k	nowled	dge									
		*****				2018	3-11-14				
Sign		Signatui	re of officer			Date					
lere		MADES	URMAN EXECUTIVE DIRECTOR								
			print name and title								
		/ Pri	int/Type preparer's name	Preparer's signature	Date			PTIN			
Paid	1		KE SCHLECT	MIKE SCHLECT				P0096784	18		
		Fir	m's name DELOITTE TAX LLP				empioyea 's EIN ▶ 86-	1065772			
	oarei Onli	<u> </u>	m's address ▶ 555 MISSION STREET		ne no (415)						
JSE	Only	у	SAN FRANCISCO, CA 94	1105							
1	ha IDC	· due = 1							Yes 🗆 No		
			this return with the preparer shown uction Act Notice, see the sepa	<u> </u>	•	C-1 N 1	12027	•			
OF P	ареги	voik ked	uction Act Notice, see the sepa	rate mstructions.		Cat No 1	T7871		Form 990 (2017)		

Form	990 (201	17)					Page 2				
Par	t IIII S	Statement	of Program Servi	ce Accomplis	hments						
	C	Check If Sched	dule O contains a resp	onse or note to a	any line in this Part	III	🗹				
1	Briefly d	describe the or	rganızatıon's mıssıon								
						DURCE BY WORKING WITH THOUS INNOVATION ON THE INTERNET	ANDS OF VOLUNTEERS TO (1)				
2		-	, ,		,	ir which were not listed on	☐ Yes ☑ No				
	the prior Form 990 or 990-EZ?										
_	,										
3	services	57	ease conducting, or i		enanges in now it co	onducts, any program	. 🗆 Yes 🗹 No				
4	Section	501(c)(3) and		ions are required	to report the amou	ree largest program services, as n nt of grants and allocations to oth					
4a	(Code) (Expenses \$	966,365	including grants of \$	0) (Revenue \$	0)				
	See Addıt	tional Data									
4b	(Code) (Expenses \$	2,733,016	including grants of \$	182,458) (Revenue \$	0)				
	See Addıt	tional Data		· ·			· 				
4c	(Code See Addit	tional Data) (Expenses \$	13,852,824	ıncludıng grants of \$	3,430,739) (Revenue \$	114,878)				
	(Code) (Expenses \$	1,733,242	including grants of \$	15,649) (Revenue \$	6,750)				
	DEVELOP	PING OPEN-SOU	RCE SOFTWARE TO ADD	RESS KEY INTERNET	THEALTH ISSUES SUC	ILLA CONTINUES TO PROVIDE SUPPORT H AS DIGITAL INCLUSION AND EDUCAT ELOPERS CREATING TOOLS FOR MORE	TION THE PRIMARY ACTIVITY IN				
4d	Other pr	rogram servic	es (Describe in Sched	lule O)							
	(Expens	ses \$	1,733,242 ind	cluding grants of	\$	15,649) (Revenue \$	6,750)				
4e	Total n	rogram serv	ice expenses >	19,285,4	47						

or X as applicable

Checklist of Required Schedules

Page 3

Nο

Nο

Νo

Nο

Nο

Nο

No

Nο

Nο

Nο

No

Nο

No

Nο

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Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Yes

4

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . .

5

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

11a

11b

11c

11d

11e

11f

12a

12b

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14a

14h

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Form 990 (2017) Pag									
Par	IV Checklist of Required Schedules (continued)								
_			Yes	No					
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No					
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b							
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes						
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes						
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes						
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No					
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No					
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No					
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)								
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No					
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No					
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \cdot .	29		No					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No					

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Νo

Νo

Nο

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35a

35h

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38

Yes

Yes

Yes

Yes

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25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during
С	Did the organization maintain an escrow account other than a refunding escrow at any time of to defease any tax-exempt bonds?
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period ex

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 💆

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

All Form 990 filers are required to complete Schedule O

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

33

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orm Par	t V Statements Regarding Other IRS Filings and Tax Compliance			Page 5
Гаг	Check if Schedule O contains a response or note to any line in this Part V			✓
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 37			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	_		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►CA , FR , UK , DA , FI , GM , BE , SP , CH , AS , TW , JA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 a	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	_		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>

Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	' respo	nse to li	nes		
		Check if Schedule O contains a response or note to any line in this Part VI			✓		
Se	ction	A. Governing Body and Management	-	1			
1a	Enter	the number of voting members of the governing body at the end of the tax year a		Yes	No		
	body,	ere are material differences in voting rights among members of the governing, or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent					
2		iny officer, director, trustee, or key employee have a family relationship or a business relationship with any other er, director, trustee, or key employee?	2		No		
3		he organization delegate control over management duties customarily performed by or under the direct supervision icers, directors or trustees, or key employees to a management company or other person?	3		No		
4		he organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes			
5	Did th	he organization become aware during the year of a significant diversion of the organization's assets?	5		No No		
6							
7a	Did th	he organization have members, stockholders, or other persons who had the power to elect or appoint one or more					
		bers of the governing body?	7a		No		
	perso	ony governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ons other than the governing body?	7b		No 		
8		he organization contemporaneously document the meetings held or written actions undertaken during the year by ollowing					
а	The g	governing body?	8 a	Yes			
b		committee with authority to act on behalf of the governing body?	8 b		No		
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No		
Se	ction	B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code				
10-	D.4 +	he organization have local chapters, branches, or affiliates?	10a	Yes	No No		
	If "Ye	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b		110		
11a		the organization provided a complete copy of this Form 990 to all members of its governing body before filing the					
		7	11a	Yes			
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form 990					
		he organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes			
	confli		12b	Yes			
С	Sched	he organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in dule O how this was done</i>	12c	Yes			
13		he organization have a written whistleblower policy?	13		No		
14		he organization have a written document retention and destruction policy?	14	Yes			
15	perso	he process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
		organization's CEO, Executive Director, or top management official	15a	Yes			
b		r officers or key employees of the organization	15b		No_		
162		es" to line 15a or 15b, describe the process in Schedule O (see instructions) he organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a					
	taxab	ole entity during the year?	16a		No		
D	ın joir	es," did the organization follow a written policy or procedure requiring the organization to evaluate its participation into venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt s with respect to such arrangements?	16b				
Se				'			
17	Lıst t	C. Disclosure			MANI		
		he States with which a copy of this Form 990 is required to be filed AL , AR , CA , CT , FL , GA , IL , KS , KY , N					
	. .	he States with which a copy of this Form 990 is required to be filed AL , AR , CA , CT , FL , GA , IL , KS , KY , NMS , NC , NH , NJ , NY , OR , PA , RI , SC , WV , DC , HI , NM					
18		he States with which a copy of this Form 990 is required to be filed AL , AR , CA , CT , FL , GA , IL , KS , KY , NMS , NC , NH , NJ , NY , OR , PA , RI , SC ,					
18	availa	he States with which a copy of this Form 990 is required to be filed AL , AR , CA , CT , FL , GA , IL , KS , KY , N MS , NC , NH , NJ , NY , OR , PA , RI , SC , WV , DC , HI , NM on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)					
18 19	availa O Descr	AL , AR , CA , CT , FL , GA , IL , KS , KY , MS , NC , NH , NJ , NY , OR , PA , RI , SC , WV , DC , HI , NM on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) able for public inspection. Indicate how you made these available. Check all that apply Dwn website. Another's website. Upon request. Other (explain in Schedule O) ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest.					
	Descripolicy State	AL , AR , CA , CT , FL , GA , IL , KS , KY , MS , NC , NH , NJ , NY , OR , PA , RI , SC , WV , DC , HI , NM on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) able for public inspection Indicate how you made these available Check all that apply Own website Another's website Upon request Other (explain in Schedule O)					

organization and any related organizations

(12) CHRISTOPHER LAWRENCE

VP LEADERSHIP NETWORK

(13) ASHLEY BOYD FROM 010317

DIRECTOR, HUMAN RESOURCES

(16) HIRAM PAUL JOHNSON

(17) MATTHEW WILLSE

DESIGN MANAGER

DIRECTOR, ISSUES MARKETING

SR FELLOW, INTERNET HEALTH ISSUES

VP ADVOCACY

(14) MICHAEL AUKLAND

(15) AN-ME CHUNG

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax

- year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

,											
 List all of the organization's former officers, of reportable compensation from the organization 					pen	sated	em	ployees who receiv	ed more than \$100	,000	
List all of the organization's former director	rs or trustees	that re	ceive	d, ın							
organization, more than \$10,000 of reportable of List persons in the following order individual trust compensated employees, and former such perso	stees or directo		_								
Check this box if neither the organization no		rganizat	ion c	omp	ens	ated a	anv i	current officer, dire	ector, or trustee		
(A) Name and Title	(B) Average hours per week (list any hours	Position that pers	on (do an on on is	(C) o not e bo both) t ch ox, ι h ar		ore er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)			Officer	Former Highest compensated employee Key employee Officer		Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) MITCHELL BAKER CHAIR	1 00										
PAID ONLY BY RELATED FOR-PROFIT	40 00	×							2,294,667	51,359	
(2) BRIAN BEHLENDORFF	1 00										
DIRECTOR	0 00	×							0	0	
(3) BOB LISBONNE DIRECTOR PAID ONLY BY RELATED FOR-PROFIT	1 00	×						C	96,000	0	
(4) CATHY DAVIDSON DIRECTOR	1 00	×						C	0	0	
(5) RONALDO LEMOS DIRECTOR	1 00	×						C	0	0	
(6) HELEN TURVEY DIRECTOR	1 00	х						C	0	0	
(7) MOHAMED NANABHAY FROM 4517 DIRECTOR	1 00	х						C	0	0	
(8) NICOLE WONG FROM 4517 DIRECTOR	1 00	×						C	0	0	
(9) MARK SURMAN EXECUTIVE DIRECTOR/PRESIDENT	40 00			×				235,829	0	28,716	
(10) JIM COOKTREAS THRU 53117 PAID ONLY BY RELATED FOR-PROFIT	1 00			x				C	1,222,250	53,909	
(11) ANGELA PLOHMAN EXECUTIVE VP, SECRETARY, TREASURER	40 00			×				163,862	2. 0	22,079	
	40.00		—		T	1	t	1	1		

40 00

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0 00 40 00

0.00 40 00

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206,000

179,511

126,412

154,369

142,941

109,232

0

0

0

0

89,325

51,806

54,943

71,019

70,310

79,450

Form **990** (2017)

MOZILLA CORPORATION

331 E EVELYN AVENUE MOUNTAIN VIEW, CA 94041 RESEARCH ACTION DESIGN

JOSHUA TREE, CA 92252 ROCKWOOD LEADERSHIP

1212 BROADWAY SUITE 700 OAKLAND, CA 94612

compensation from the organization ▶ 19

441 LOGUE AVENUE MOUNTAIN VIEW, CA 94043

PO BOX 519

UPWORK

331 EAST EVELYN AVENUE MOUNTAIN VIEW, CA 94041 ABIGAIL S PHILLIPS

Name and Title

Average

hours per

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

amount of other

Reportable

compensation

(D)

Reportable

compensation

SERVICE AGREEMENT

CONSULTING SERVICES

CONTRACT SERVICES

STAFF TRAINING/DEVELOPMENT

LEGAL SERVICES

Page 8

469,404

208,000

203,100

195,000

178,383

Form **990** (2017)

		week (list any hours	ıs b		ın of	fice	r and a ee)		from the organization (W-	from related organization: (W- 2/1099-	s	compen	nsation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trust⊭⊬	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)		organizat relat organiz	ted
	WILLIAM EASTON						×		117,27		0		67,138
LEAD	, FUND & EMAIL STRAT	0 00									+		
											\dashv		
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						H					\dashv		
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							<u> </u>				\perp		
	Sub-Total	 VII Section A	• •	•	•	1	`				\vdash		
	Total (add lines 1b and 1c)	•				1			1,435,427	3,612,917	1	640,0	
2	Total number of individuals (including but of reportable compensation from the organization)		those li	sted	abov	ve) v	who re	ceıv	ed more than \$10	0,000			
	or reportable compensation from the orga	41 × 41											
3	Did the organization list any former offic	er, director or t	rustee.	kev (emp	love	e. ar h	niahe	est compensated e	mplovee on [Yes	No
	line 1a? If "Yes," complete Schedule J for			•						• •	3		No
4	For any individual listed on line 1a, is the organization and related organizations grandividual									the			
_					•	•		•			4	Yes	
5	Did any person listed on line 1a receive of services rendered to the organization? If					•			-	I	5		No
	ection B. Independent Contractors												
1	Complete this table for your five highest from the organization Report compensation										pens	sation	
	Name and b	(A) ousiness address							Descrii	(B) otion of services		(C Compen	
MOZI	LLA CORDORATION								CEDVICE ACD		\rightarrow		460 404

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Position (do not check more

than one box, unless person

		(2017)										Page 9
Part '	VII											
		Check if Schedul	e O contains	a respo	onse or note to	Í	this Part VIII (A) revenue	Rela ex fur	(B) ated or empt nction venue	(C) Unrelated business revenue	(D) Rever excluded tax under: 512-5	nue I from sections
so	1a	Federated campaig	ns	1a			•		•		•	
anta	1	b Membership dues		1 b								
<u> </u>	•	c Fundraising events		1 c		_						
ifts, ar A	•	d Related organizatio	ns	1 d		_						
ons, Gifts, Grants Similar Amounts	•	e Government grants (c	ontributions)	1e	2,112,4	33						
Sil	1	 All other contributions and similar amounts n 	, gıfts, grants, ot ıncluded	1f	7,729,1	วา						
Contributions, Gifts, Grants and Other Similar Amounts		above		11	7,729,1	32						
	9	g Noncash contribution in lines 1a-1f \$	ons included									
Cont and	h	Total.Add lines 1a-1	lf		•	•	9,841,565					
	_				Busir	ness Code						
и	2a	LICENSING ROYALTIES				900099	10,0	73,509			10	0,073,509
æ	b	SPONSORSHIPS				900099		73,622	73,			
Service Revenue		MOZFEST & OTHER EVE				900099		25,556	25, 21,			
₹	u	WORKSHOP & TRAINING	J FEES			300033		21,020	21,	020		
Program	e											
¥ og		All other program se				10,193,707						
_		Total.Add lines 2a-2i						1	1			
	S					• • • • • • • • • • • • • • • • • • •	458,546	5				458,546
		Income from investm				•						
	5	Royalties	(ı) Rea		(II) Persona	 						
	6a	Gross rents	(I) Rea	!	(II) Persona	"						
	b	Less rental expenses										
	c	Rental income or (loss)										
	d	Net rental income o	r (loss)									
		- Met remai meeme e	(i) Securit		(II) Other	<u> </u>						
	7a	Gross amount from sales of										
		assets other than inventory										
		Less cost or										
		other basis and sales expenses										
	c	Gain or (loss)										
		Net gain or (loss)				>						
a	Вa	Gross income from f (not including \$		ents of								
nuə		contributions reporte See Part IV, line 18										
ev.	ь	Less direct expense		ь								
er F		: Net income or (loss)			ents	<u> </u>						
Other Revenue	9a	Gross income from g See Part IV, line 19		ies								
		See Part IV, IIIIe 19		а								
	b	Less direct expense	s	b								
		: Net income or (loss)		activit	ies	<u> </u>						
	10a	Gross sales of invent returns and allowand										
				а								
		Less cost of goods s		b								
	C	Net income or (loss) Miscellaneous		invent	tory	<u>+</u>						
	11	aDIVIDENDS - MOZI		TION		3000	91,198	3				91,198
	b	OTHER INCOME			90	10099	1,430	0	1,430			
	c	:										
		All other revenue .										
	e	Total. Add lines 11a	-11d		1	<u> </u>	92,628	8				
	12	Total revenue. See	Instructions			▶	20,586,446	5	121,628		0 10	0,623,253
								•			Form 99	

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete	_	•		
Check if Schedule O contains a response or no Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	te to any line in this Part IX (A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21.	s and 1,235,716	1,235,716	general expenses	
2 Grants and other assistance to domestic individuals S IV, line 22	See Part 786,900	786,900		
3 Grants and other assistance to foreign organizations, governments, and foreign individuals See Part IV, lin and 16		1,606,230		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, key employees	and 977,129	445,642	332,131	199,356
6 Compensation not included above, to disqualified persidefined under section 4958(f)(1)) and persons describ section 4958(c)(3)(B)	sons (as ped in			
7 Other salaries and wages	6,677,608	5,860,136	545,827	271,645
8 Pension plan accruals and contributions (include section (k) and 403(b) employer contributions)	on 401 618,595	494,153	73,024	51,418
9 Other employee benefits	2,378,763	1,914,838	202,894	261,031
10 Payroll taxes	. 591,182	486,640	66,449	38,093
11 Fees for services (non-employees)				
a Management	3,207,875	2,731,738	464,939	11,198
b Legal	449,805	40,448	394,358	14,999
c Accounting	207,897		207,897	
d Lobbying	378,838	378,838		
e Professional fundraising services See Part IV, line 17	10,670			10,670
f Investment management fees	163,637		163,637	
g Other (If line 11g amount exceeds 10% of line 25, co (A) amount, list line 11g expenses on Schedule O)	lumn 103,779	103,779		
12 Advertising and promotion	38,113	37,869	244	
13 Office expenses	98,401	60,157	32,904	5,340

415,654

382,834

728,451

23,630

13,086

450,683

175,153

169,093

14,675

24,206,401

2,302,004

14 Information technology

18 Payments of travel or entertainment expenses for any federal, state, or local public officials •

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation
Check here ► ☐ if following SOP 98-2 (ASC 958-720)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization .

21 Payments to affiliates . . .

expenses on Schedule O)

c RECRUITMENT EXPENSES

a STAFF DEVELOPMENT

b TRANSACTION FEES

e All other expenses

15 Royalties .

20 Interest .

23 Insurance .

d

16 Occupancy .

340,100

313,308

687,832

7,578

73,513

6,912

19,285,447

1,673,120

45,155

41,552

582,401

40,619

12,371

13,086

365,924

169,093

102

3,754,607

30,399

27,974

46,483

3,681

11,246

175,153

7,661

1,166,347

Form **990** (2017)

11

12

13

14

15

16

17

18

26

27

28

29

30

31

32

33

34

Fund Balances

Assets or

Net

5.296.390

1,684,368

2,037,353

5.256

30,371

19.310.817

4,055,285

1.000.010

33,419,850

3.035,473

3,145,473

26,345,173

3,929,204

30,274,377

33.419.850

Form **990** (2017)

110,000

16.937.163

4,074,947

1.000.010

34,645,899

2,689,162

2,744,162

26,105,443

5.796.294

31,901,737

34,645,899

55.000

11

12

13

14

15

16

17

18

25

26

27

28

29

30

31

32

33

34

End of year

Page **11**

Investments—publicly traded securities .

Accounts payable and accrued expenses .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Intangible assets

Grants payable . . .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11 .

Other assets See Part IV, line 11

Total assets.Add lines 1 through 15 (must equal line 34) . .

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

		Beginning of year		End of ye
1	Cash-non-interest-bearing		1	
2	Savings and temporary cash investments	10,104,164	2	
3	Pledges and grants receivable, net	842,987	3	

3 1,641,805 Accounts receivable, net . . . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L

Check if Schedule O contains a response or note to any line in this Part IX

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Assets Notes and loans receivable, net . Inventories for sale or use . 8

26.783 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 274,206 10a basis Complete Part VI of Schedule D 243,835 18,040 10c b Less accumulated depreciation 10b

	19	Deferred revenue	19	
	20	Tax-exempt bond liabilities	20	
Ś	21	Escrow or custodial account liability Complete Part IV of Schedule D	21	
ilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		
je;		persons Complete Part II of Schedule L	22	
	23	Secured mortgages and notes payable to unrelated third parties	23	
	24	Unsecured notes and loans payable to unrelated third parties	24	

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Page **12**

31,901,737

1.932.595

60,000

30,274,377

No

Nο

Yes

Yes

Yes

Yes

Yes Form 990 (2017)

2a

2b

2c

3a

3b

5

6

7 8

9

10

3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4

Form 990 (2017)

Reconcilliation of Net Assets

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Financial Statements and Reporting

Other changes in net assets or fund balances (explain in Schedule O)

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

Check if Schedule O contains a response or note to any line in this Part XII

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

Part XI

5

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

Additional Data

Software ID:

Software Version:

EIN: 20-0097189

Name: MOZILLA FOUNDATION

Form 990 (2017)

Form 990, Part III, Line 4a:

AGENDA SETTINGMOZILLA DEPLOYS ITS EXPERTISE TO IDENTIFY THREATS TO AND OPPORTUNITIES FOR A HEALTHY INTERNET. WE CURRENTLY ASSESS INTERNET HEALTH ACROSS FIVE CATEGORIES PRIVACY AND SECURITY, OPEN INNOVATION, DECENTRALIZATION, WEB LITERACY, AND DIGITAL INCLUSION MOZILLA THEN WORKS TO MAKE INTERNET HEALTH ISSUES PART OF MAINSTREAM, PUBLIC DISCOURSE MOZILLA PUBLISHES AN ANNUAL INTERNET HEALTH REPORT. AN OPEN-SOURCE DOCUMENT THAT EXPLORES THESE ISSUES IN 2017, MOZILLA SPENT \$ 966,365 TO SUPPORT ITS AGENDA-SETTING WORK

MOVEMENT BUILDINGMOZILLA'S ORGANIZING TEAM MOBILIZES MILLIONS OF PEOPLE TO STAND UP FOR A HEALTHY INTERNET IT RAISES AWARENESS, INSPIRES ACTION AND RUNS LARGE SCALE PUBLIC EDUCATION CAMPAIGNS AROUND TOPICS LIKE ONLINE PRIVACY AND DIGITAL INCLUSION IN 2017, MOZILLA'S ONLINE

MOBILIZATION WORK INCLUDED PUBLIC EDUCATION AND ADVOCACY CAMPAIGNS AROUND DATA PROTECTION, THE SECURITY OF CONNECTED PRODUCTS, COPYRIGHT

AND NET NEUTRALITY THESE CAMPAIGNS REACHED MILLIONS OF PEOPLE IN DOZENS OF COUNTRIES IN 2017, MOZILLA SPENT \$2,733,016 TO SUPPORT ITS MOVEMENT

Form 990, Part III, Line 4b:

BUILDING WORK

LEADERSHIP DEVELOPMENTMOZILLA PROVIDES SUPPORT AND A GATHERING PLACE FOR A BROAD GLOBAL COMMUNITY WORKING ON INTERNET HEALTH THIS INCLUDES A SET OF PROJECTS TO IDENTIFY, CONNECT AND SUPPORT LEADERS FROM DIVERSE FIELDS LIKE TECHNOLOGY, SCIENCE, EDUCATION AND INTERNET POLICY MOZILLA CARRIES OUT THIS WORK THROUGH FELLOWSHIPS AND OPEN LEADERSHIP TRAINING PROGRAMS WE ALSO CARRY OUT THIS WORK THROUGH GRATHERS 2.500 LIKE—MINDED THE MOZILLA GIGABIT COMMUNITY FUND, WHICH SUPPORTS COMMUNITY INNOVATORS. AND EVENTS LIKE THE MOZILLA FESTIVAL, WHICH GATHERS 2.500 LIKE—MINDED

INTERNET HEALTH ADVOCATES ANNUALLY IN 2017, MOZILLA SPENT \$ 13,256,720 TO SUPPORT THE MOZILLA LEADERSHIP PROGRAM

Form 990, Part III, Line 4c:

efile GRAPHIC print - DO NOT P			nt - DO NOT PROCE	SS	As Filed Data -			DLN: 9	3493319089328
SCI	IFD	ULE A	Dubli	ic C	harity Statu	c and Dul	alia Sunn	ort	OMB No 1545-0047
	m 990				harity Statu				2017
90E	(Z)			4	947(a)(1) nonexe	mpt charitable	trust.		401 /
Denart	nent of	the Treasury	► Information a		Attach to Form ! Schedule A (Form			ıctions is at	Open to Public
nterna	Reven	ue Service ne organiza	tion		<u>www.irs.g</u>	ov/form990.		Employer identific	Inspection
		NDATION							acion number
Pai	+ T	Reason	for Public Charity S	tatus	(All organization	s must comple	te this part) 9	120-0097189 See instructions	
			private foundation beca					occ macractions.	
1		A church, c	onvention of churches, c	or asso	ociation of churches	described in sec	tion 170(b)(1)	(A)(i).	
2		A school de	scribed in section 170((b)(1)	(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3	\Box	A hospital o	or a cooperative hospital	l servic	e organization desci	nbed in section	170(b)(1)(A)(iii).	
4			esearch organization operand state	erated	in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5		An organiza (b)(1)(A)	ation operated for the be (iv). (Complete Part II)	enefit c	of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local governmer	nt or g	overnmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
7	✓	section 17	ation that normally recei [*] 1 0(b)(1)(A)(vi). (Comp	plete P	art II)			init or from the gener	al public described in
8		A communi	ty trust described in sec	ction 1	l70(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization ant college of agricultur						ege or university or a
LO		from activit	ition that normally receives related to its exempt income and unrelated been section 509(a)(2).	t funct ousines	nons—subject to cert ss taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11			ation organized and oper	-		r public safety S	ee section 509	(a)(4).	
12		more public	ation organized and oper	ons de	scribed in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
а		Type I. A so	through 12d that descr supporting organization on n(s) the power to regula Part IV, Sections A an	operate arly app	ed, supervised, or co	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme	supporting organization nt of the supporting organizations plete Part IV, Sections	anızatı	on vested in the san				
С			unctionally integrated organization(s) (see insti						ted with, its
d		functionally	on-functionally integr integrated The organized You must complete	zation 🤉	generally must satis	fy a distribution	requirement and		
e			box if the organization re or Type III non-function				RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter		of supported organization		· · · -	-			
g			ing information about th					Γ	
(i) Name of supported organization				(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the org in your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
						Yes	No		
		· ·							
Total			tion Act Notice, see th			Cat No 11285		<u> </u>	 90 or 990-EZ) 2017

Page 2

Cooking A	Bublic Connect
	III. If the organization fails to qualify under the tests listed below, please complete Part III.)
	(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part
	(D)(1)(A)(IX)

	III. If the organization fa						ally under Part
s	Section A. Public Support	ans to quanty and	aci the tests list	ca below, picas	o complete i are		
_	Calendar year	(-) 2012	(h) 2014	(a) 201E	(4) 2016	(-) 2017	(6) Tabal
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	(a) 2013 6,909,597	(b) 2014 12,570,258	(c) 2015	(d) 2016 12,455,200	(e) 2017 9,913,65	(f) Total
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	6,909,597	12,570,258	12,429,238	12,455,200	9,913,6	57 54,277,950
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the						16,784,029
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						37,493,921
S	ection B. Total Support						
	Calendar year	(a)2013	(b) 2014	(c)2015	(d)2016	(e) 2017	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	6,909,597	12,570,258	12,429,238	12,455,200	9,913,6	57 54,277,950
8	Gross income from interest,	-,,	==,=:,	,,	,,	-,,-	- 1,211,411
	dividends, payments received on securities loans, rents, royalties and income from similar sources	446,218	437,665	445,798	353,181	458,54	2,141,408
9	Net income from unrelated business activities, whether or not the business is regularly carried on		45,850				45,850
10	- ·			2,533	11,891	92,6.	107,052
11							56,572,260
12	10 Gross receipts from related activities,	etc (see instructio	ns)			12	
	First five years. If the Form 990 is for			d fourth or fifth	tay year as a sest	L .	
	•	-			•	. , . ,	<u>-</u>
_	check this box and stop here						
	Public support percentage for 2017 (lin		_	dumn (f))			
				Juliii (1))		14	66 280 %
	Public support percentage for 2016 Sc				14 23 4/20/	15	58 520 %
16a	33 1/3% support test—2017. If the				14 IS 33 1/3% OF	more, check tr	
b	and stop here. The organization quality 33 1/3% support test—2016. If the	e organization did	not check a box or	line 13 or 16a, a	nd line 15 is 33 1/	3% or more, ch	_
17a	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organizatio in Part VI how the organization meets	t— 2017. If the org	janization did not c -and-circumstances	heck a box on lines" test, check this	box and stop her	r e. Explain	▶⊔
b	organization 10%-facts-and-circumstances tes	s t—2016. If the or	ganization did not	check a box on lin	e 13, 16a, 16b, o	r 17a, and line	▶ □

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ightharpoonssupported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2017

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	·	
	determination	3b	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		

C	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use		
		3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and		

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)			

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing			
	organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a			
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)			

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

	ret IV Supporting Organizations (continued)		-	age :
110	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		res	INO
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
u	governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
_	detion 5. Type 2 supporting organizations	-	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
_	Carling O. Tons II Commenting Operations			
	ection C. Type II Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of		103	-140
_	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
- 5	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	a The organization satisfied the Activities Test Complete line 2 below	•		
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	c	ınetru	ctions)	
	The organization supported a governmental entity. Describe in Fait VI now you supported a government entity (see	mstru	ctions	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	20		
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 	3a		
	 b Did the organizations exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard 	3h		

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O)raani:	zatione	Pag
1	Check here if the organization satisfied the Integral Part Test as a qualifying true	_		Part VI) Soc
_	instructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) $\frac{1}{2}$	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in	ntegrate	d Type III supporting or	ganization (see

Qualified set-aside amounts (prior IRS approval require				
Other distributions (describe in Part VI) See instructio	ns			
Total annual distributions. Add lines 1 through 6				
Distributions to attentive supported organizations to wh details in Part VI) See instructions	sive (provide			
Distributable amount for 2017 from Section C, line 6				
Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocations (see (i) Excess Distributions (ii) Underdistributions Pre-2017 Amount for				
	Other distributions (describe in Part VI) See instruction Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to whole details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Fycess Distributions Underdistributions	

details in Part VI) See instructions	details in Part VI) See instructions				
9 Distributable amount for 2017 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount					
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017		
1 Distributable amount for 2017 from Section C, line 6					
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions					
3 Excess distributions carryover, if any, to 2017					
а					
b From 2013					

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

Schedule A (Form 990 or 990-EZ) (2017)

i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

instructions)

See instructions

3j and 4c 8 Breakdown of line 7

Additional Data

Software ID: Software Version:

EIN: 20-0097189

Name: MOZILLA FOUNDATION

chedule A (Form 990 or 990-E2) 2017 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE C

(Form 990 or 990-

EZ)

3

5

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

DLN: 93493319089328

OMB No 1545-0047

Open to Public Inspection

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Department of the Treasury ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at Internal Revenue Service www.irs.gov/form990.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c

Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

(Proxy Tax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations, Complete Part III.

• Section 50 f(c)(4), (5), or (6) organizations. Complete Fait in	
Name of the organization	Employer identification number
MOZILLA FOUNDATION	• •
	20-0097189
Part I-A Complete if the organization is exempt under section 501(c) or is a section	n 527 organization.
1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (se	ee instructions for definition of

"political campaign activities") 2 Political campaign activity expenditures (see instructions) 3

Volunteer hours for political campaign activities (see instructions)

Part :	Complete if the organization is exempt under section 501(c)(3).		
1 6	nter the amount of any excise tax incurred by the organization under section 4955	>	\$

1 2

Enter the amount of any excise tax incurred by organization managers under section 4955

fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes □ No Was a correction made? □ No ☐ Yes

If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Did the filing organization file Form 1120-POL for this year?

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

(a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

208,475

531

230,923

443,316

No

Yes

1

2

3,387

(b)

Amount

(a) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes No

Yes

Yes

Yes

Yes

Yes

1

2a

2b

2c 3

> 4 5

Nο

No

Nο

Nο

No

1

c

3

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Volunteers?

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

Media advertisements? Mailings to members, legislators, or the public?

Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?

Direct contact with legislators, their staffs, government officials, or a legislative body?

Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i

2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6).

Were substantially all (90% or more) dues received nondeductible by members? 1 2

Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Dues, assessments and similar amounts from members

1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

expenses for which the section 527(f) tax was paid). Current year

h Carryover from last year

C

3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does

the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

5 Taxable amount of lobbying and political expenditures (see instructions) Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference

PART II-B, LINE 1

INDIA

Explanation

IN 2017, MOZILLA PROVIDED MATERIAL REGARDING COPYRIGHT REFORM IN THE EUROPEAN UNION FOR

VARIOUS INDEPENDENT GROUPS AND INDIVIDUALS IT ALSO MET WITH ORGANIZATIONS AND INDIVIDUALS IN INDIA TO HELP THEM IN THEIR EFFORTS TO SHAPE DATA PROTECTION LEGISLATION IN

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2017

DLN: 93493319089328OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.qov/form990.

Open to Public
S.gov/form990. Inspection

| Employer identification number

	ZILLA FOUNDATION				p	loyer rachineation number
						097189
Pa	organizations Maintaining Donor Advi				or Acc	ounts.
	Complete if the organization answered "Ye			IV, line 6. sed funds		(b)Funds and other accounts
1	Total number at end of year	(a) Dono	auvi	sea runus		(b) Funds and other accounts
2	Aggregate value of contributions to (during year)					
2 3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex			ets held in donor ad	lvised f	unds are the
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?					
Pa	rt III Conservation Easements. Complete if the	ne organization a	nswe	red "Yes" on Forr	n 990,	
1	Purpose(s) of conservation easements held by the organ					·
	Preservation of land for public use (e.g., recreation	or education)		Preservation of an	histori	cally important land area
	Protection of natural habitat	•	П			historic structure
	Preservation of open space		_	escivation or a t	e en cirre	
_	' '	16.1			,	
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	ion co	ntribution in the foi	rm of a	Held at the End of the Year
а	Total number of conservation easements				2a [ned at the End of the Teal
b	Total acreage restricted by conservation easements				2b	
c	Number of conservation easements on a certified histori	c structure include	d ın (a)	2c	
d	Number of conservation easements included in (c) acqui		,	,	2d	
3	structure listed in the National Register Number of conservation easements modified, transferre					angation during the
3	tax year •	a, released, exting	uisnet	i, or terminated by	the org	anization during the
4	Number of states where property subject to conservation	n easement is loca	ted 🕨			
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		ıng, ır	spection, handling	of viola	tions,
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of v	olatio	ns, and enforcing co	onserva	
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violation	ons, a	nd enforcing conser	vation	easements during the year
8	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(II)?	above satisfy the i	equir	ements of section 1	70(h)(4	4)(B)(I) ☐ Yes ☐ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the org				
Par	Complete if the organization answered "Ye				er Sir	nilar Assets.
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar	public exhibition, e	ducat	on, or research in f		
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1					> \$
(i	i)Assets included in Form 990, Part X					▶ \$
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS:				ncıal ga	
а	Revenue included on Form 990, Part VIII, line 1	110 (NOC 330) Tela	ang a	, and a terms		▶ \$
b	Assets included in Form 990, Part X					▶ \$
For I	Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.		Cat No	52283	D Schedule D (Form 990) 20:

Pai	t IIII	Organizations Maintaining Col	lections of Art, F	listori	ical T	reası	ures, or	Other	Similar A	ssets ((continued)
3		the organization's acquisition, accessions (check all that apply)	n, and other records,	check	any of	the fo	ollowing t	hat are a	significant	use of it	s collection
а		Public exhibition		d		Loan	or excha	inge prog	rams		
b		Scholarly research		е		Othe	er				
С		Preservation for future generations									
4	Provi Part)	de a description of the organization's col XIII	lections and explain l	how the	ey furti	her th	e organız	atıon's ex	empt purpo	ose in	
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							lar	□ Y	es 🗆 No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990	, Part	IV, I	ıne 9, or	reporte	d an amo	unt on	Form 990, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	ıary for	contri	butior	ns or othe	r assets i	not	□ Y	es 🗆 No
ь	If "Y€	es," explain the arrangement in Part XIII	and complete the fo	llowing	table		[-	mount	
С	Begir	nning balance	·	_			Ī	1c			
d	Addıt	ions during the year						1d			
е	Dıstrı	butions during the year					Ī	1e			
f	Endır	ng balance						1f			
2a	Did tl	he organization include an amount on Fo	orm 990, Part X, line	21, for	escrov	v or cu	ustodial a	ccount lia	ıbılıty?		es 🗆 No
b	If "Ye	es," explain the arrangement in Part XIII	Check here if the ex	vnlanati	ion has	: heen	provideo	l in Part \	/		
	art V	Endowment Funds. Complete if									<u> </u>
			(a)Current year		rior yea				(d)Three ye		(e)Four years back
1a	Beginn	ing of year balance					, , , ,				,
b	Contrib	outions									
С	Net inv	estment earnings, gains, and losses									
d	Grants	or scholarships									
е		expenditures for facilities ograms									
f	Admını	strative expenses									
g	End of	year balance									
2 a		de the estimated percentage of the curre d designated or quasi-endowment >	ent year end balance	(line 1	g, colu	mn (a)) held a	5			
b	Perm	anent endowment 🟲									
С	Temp	orarily restricted endowment >									
	The p	percentages on lines 2a, 2b, and 2c shou	ıld equal 100%								
3a	orgar	here endowment funds not in the posses	ssion of the organizat	ion that	t are h	eld ar	nd admini	stered fo	r the	[a	Yes No
b	(ii) r	nrelated organizations	ns listed as required a	nn Scho	 adule P					3	a(i) a(ii) 3b
4		ribe in Part XIII the intended uses of the	·			•	•			. Г	
	rt VI	Land, Buildings, and Equipme									
		Complete if the organization answ		m 990	, Part	IV, I	ine 11a.	See For	m 990, Pa	art X, li	ne 10.
	Descri	iption of property (a) Cost or oth (investme		or other	basis (other)	(c) Acci	umulated d	epreciation		(d) Book value
1 a	Land										
b	Buildin	gs									
С	Leaseh	nold improvements									
d	Equipn	nent			2	74,206			243,835		30,371
e	Other										
Tot	al. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Part .	X, colur	mn (B)	, line	10(c))		>		30,371

,	Investments—Other Securities. Complete if the	ne organization answer	ed "Yes" on Form 990), Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Book value	• •	d of valuation year market value
(1) Financia	derivatives			7
(3) Other (A) OTHER S	SECURITIES AND HEDGE FUNDS	4,055,285		F
(B) (C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related.	4,055,285		
Pait VIII	Complete if the organization answered 'Yes' on F			
	(a) Description of investment	(b) Book value		d of valuation year market value
(1)				
(2)				
(3) (4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX	Other Assets. Complete if the organization answered (a) Description		V, line 11d See Form 9	(b) Book value
(1)				
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15)			>
Part X	Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	nswered 'Yes' on Form	990, Part IV, line 11	e or 11f.
1.	(a) Description of liability	(b) Book	value	
(1) Federal ı	ncome taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the text o	f the footnote to the organ	nization's financial states	ments that reports the
	or uncertain tax positions. In Part XIII, provide the text of			_

Schedule D (Form 990) 2017

Page 4

	Complete il the organiza	cion answered les on Form 330, Fait		IIIC 12a.		_
1	Total revenue, gains, and other sup	port per audited financial statements			1	
2	Amounts included on line 1 but not	on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on inve	estments	2a			
b	Donated services and use of facilitie	s	2b			
c	Recoveries of prior year grants .		2c			
d	Other (Describe in Part XIII)		2d			
e	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1				3	
4	Amounts included on Form 990, Par	t VIII, line 12, but not on line 1				
а	Investment expenses not included o	n Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 4c. ((This must equal Form 990, Part I, line 12)			5	
Par		nses per Audited Financial Statem tion answered 'Yes' on Form 990, Part			Retur	n.
1	Total expenses and losses per audit	,			1	
2	Amounts included on line 1 but not	on Form 990, Part IX, line 25				
а	Donated services and use of facilitie	s	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII)		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1				3	
4	Amounts included on Form 990, Par	t IX, line 25, but not on line 1:				
а	Investment expenses not included o	on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)		4b			
С	Add lines 4a and 4b		٠		4c	
5		(This must equal Form 990, Part I, line 18			5	
Pai	t XIII Supplemental Inform					
Pro	vide the descriptions required for Part lines 2d and 4b, and Part XII, lines 2d	: II, lines 3, 5, and 9, Part III, lines 1a and d d and 4b Also complete this part to provide	4, Par	t IV, lines 1b and 2b, Pa	rt V, line	4, Part X, line 2, Part
	Return Reference			planation		
See A	Additional Data Table					
,	tuditional Data Table					
_						

Page 5		chedule D (Form 990) 2017
	ormation (continued)	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2017

Additional Data

Software ID: Software Version:

EIN: 20-0097189

Name: MOZILLA FOUNDATION

and Hozzek Gondania

Explanation

Supplemental Information Return Reference

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION QUALIFIES AS A PUBLIC BENEFIT CHARITABLE ORGANIZATION EXEMPT FROM INCOME TA XES ON RELATED INCOME UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND APPLICABLE SECTIONS OF THE CALIFORNIA REVENUE AND TAXATION CODE THE FOUNDATION PROVIDES FOR TAX, IF ANY, ON UNRELATED BUSINESS INCOME THE CORPORATION IS A C CORPORATION INCOME TAXES ARE AC COUNTED FOR USING AN ASSET AND LIABILITY APPROACH, WHICH REQUIRES THE RECOGNITION OF DEFER RED TAX LIABILITIES AND ASSETS FOR THE EXPECTED FUTURE TAX CONSEQUENCES OF TEMPORARY DIFFE RENCES BETWEEN THE FINANCIAL STATEMENT AND TAX BASIS OF ASSETS AND LIABILITIES AT THE APPL ICABLE ENACTED TAX RATES DIFFERENCES RELATE PRIMARILY TO STATE TAXES, PROPERTY AND EQUIPM ENT, PREPAID AND ACCRUED EXPENSES VALUATION ALLOWANCES ARE ESTABLISHED, WHEN NECESSARY, TO REDUCE DEFERRED TAX ASSETS TO AMOUNTS THAT ARE MORE LIKELY THAN NOT TO BE REALIZED IN A COORDANCE WITH THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, NO PORTION OF AN UNCERTAIN TAX POSITION WILL BE RECOGNIZED IF THE POSITION HAS LESS THAN A 50%
	LIKELIHOOD OF BEING SUSTAINED UPON AUDIT BY THE RELEVANT TAXING AUTHORITY ALSO, INTEREST EXPENSE, IF ANY, IS RECOGNIZED ON THE FULL AMOUNT OF DEFERRED BENEFITS FOR UNCERTAIN TAX POSITIONS

efile GRAPHIC print	- DO NOT P	ROCESS	As Filed Data	Data - DLN: 934933190893					
SCHEDULE F (Form 990)	State	ment of	Activities (Outside the United States					
(, , , , , , , , , , , , , , , , , , ,	► Comple	ete if the organi		res" to Form 990, Part IV, I to Form 990.	ıne 14b, 15	, or 16.	2017		
Department of the Treasury Internal Revenue Service	► Informat	ion about Sche	dule F (Form 990) :	and its instructions is at wi	vw.irs.gov/	form990.	Open to Public Inspection		
Name of the organization MOZILLA FOUNDATION						Employer iden	tification number		
MOZILLA FOUNDATION						20-0097189			
	nformation o Part IV, line :		s Outside the l	Jnited States. Comple	te if the o	organization ai	nswered "Yes" to		
other assistance, t to award the grant	the grantees' ets or assistance. Describe in F	eligibility for the?	he grants or assis	substantiate the amount stance, and the selection dures for monitoring the	criteria u	sed	✓ Yes □ No ner assistance		
3 Activites per Region	(The following	g Part I, line 3	table can be dupli	cated if additional space is	needed)				
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program s	ty listed in (d) is a service, describe ific type of e(s) in region	(f) Total expenditures for and investments in region		
(1) See Add'l Data									
(2)									
(3)									
(4)									
(5)									
3a Sub-total b Total from continuat Part I			3 174				5,662,75 <u>3</u> 0		
c Totals (add lines 3a For Paperwork Reduction		the Instruction	3 174		No 50082	W Schedul	5,662,753 e F (Form 990) 2017		

3 Enter total number of other organizations or entities .

18

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)							Schedule	F (Form 990) 2017

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

(5)				Schedule	F (Form 990) 2017
(6)					
(7)					
(8)					

(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				

(8)				
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				

(12)				
(13)				
(14)				
(15)				
(16)				

(2) (3) (4) (5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14)

(15) (16) (17) (18) Page 3

Schedule F (Form 990) 2017

Part III can be duplicated if additional space is needed. (c) Number of (a) Type of grant or assistance (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation non-cash (book, FMV, assistance assistance appraisal, other)

(1) See Add'l Data

Sche	dule F (Form 990) 2017		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☑ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	☑ No

Schedule F (F	orm 990) 2017 Page 5
	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Return Reference	Explanation
PART I, LINE 2	WE MAINTAIN INFORMATION ON GRANTS, INCLUDING SUPPORTING DOCUMENTATION SUCH AS GRANT PROPOSALS, SIGNED AGREEMENTS, REPORTS FROM GRANTEES, ETC FOR FELLOWSHIP GRANTEES, GRANTS ARE MADE PURSUANT TO AGREEMENTS WITH THE FELLOWS AND/OR HOST INSTITUTIONS TO ENSURE THAT THE FELLOWSHIP RECEIPIENTS WILL BE PURSUING A DEFINED RESEARCH PROGRAM THAT WILL AID THE DEVELOPMENT OF THE FELLOWSHIP RECIPIENT AS WELL AS ADVANCING RESEARCH IN AREAS MATCHING MOZILLA'S EXEMPT PURPOSES IN OTHER CASES, WE ENTER INTO APPROPRIATE CONTRACTUAL AGREEMENTS WITH INDIVIDUAL OR CORPORATE GRANTEES REQUIRING THEM TO ACCOMPLISH CHARITABLE WORK OF DIRECT BENEFIT TO THE PUBLIC AND SPECIFICALLY DESCRIBED IN A STATEMENT OF WORK FOR GRANTS TO NON-US NON-PROFIT ORGANIZATIONS, WE GENERALLY USE A GRANT AGREEMENT THAT RESTRICTS THE USE OF THE FUNDS TO SPECIFIC CHARITABLE PROJECTS AND INCLUDES REQUIREMENTS FOR RECORDKEEPING AND REPORTING ON THE USE OF FUNDS IF WE WISH TO PROVIDE GENERAL UNRESTRICTED SUPPORT, WE DO SO ONLY AFTER DETERMINING THAT THE GRANTEE QUALIFIES AS THE EQUIVALENT OF A U S SECTION 501(C)(3) ORGANIZATION, TYPICALLY BY RELYING ON THE ADVICE

OF A QUALIFIED TAX PRACTITIONER SUCH AS THAT PROVIDED BY NGOSOURCE ORG. THE GRANT AGREEMENTS WE USE INCLUDE REQUIREMENTS FOR THE GRANTEE TO REPORT ON USE OF THE FUNDS

Additional Data

SOUTH AMERICA

Software ID: Software Version:

EIN: 20-0097189

Name: MOZILLA FOUNDATION

(b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures

GRANTS AND STIPENDS

TO RECIPIENTS LOCATED
IN THE REGION

244,778

Form 990 Schedule F Part I - Activities Outside The United States

(a) Kegion	offices in the region	employees or agents in region	in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	is a program service, describe specific type of service(s) in region	for region
EAST ASIA AND THE PACIFIC	0	3		GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION	51,058

9 PROGRAM SERVICES

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region					
EUROPE (INCLUDING ICELAND & GREENLAND)	1	90		GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, PROGRAM MANAGEMENT, OPERATIONS, WEB DEVELOPMENT, DESIGN, EVENT PRODUCTION, USE OF CONSULTANTS	1,929,019					
NORTH AMERICA (CANADA)	2	63		GRANTS AND STIPENDS TO RECIPIENTS LOCATED IN THE REGION, MANAGEMENT, OPERATIONS, WEB DEVELOPMENT, DESIGN, EVENT PRODUCTION, USE OF CONSULTANTS	3,250,604					

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) PROGRAM SERVICES 30.184 NORTH AFRICA IGRANTS AND STIPENDS TO RECIPIENTS LOCATED IIN THE REGION SUB-SAHARAN AFRICA 8 PROGRAM SERVICES IGRANTS AND STIPENDS 157,110 TO RECIPIENTS LOCATED IN THE REGION

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash and EIN(If cash grant non-cash organization grant disbursement assistance appraisal, applicable) assistance other) EUROPE TO STRENGTHEN 13,562 CASH VALUE (INCLUDING CIVIL SOCIETY ICELAND & IENGAGEMENT AT GREENLAND) THE 2017 ICDPPC EUROPE TO EDUCATE THE 26,250 CASH VALUE (INCLUDING IPUBLIC ON ICELAND & ITHREATS TO PRIVACY AND IGREENLAND) ISECURITY

ONLINE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** SPONSORSHIP 10,000 CASH VALUE (INCLUDING OF DISRUPTION NETWORK LAB'S ICELAND & [GREENLAND] FEAR MACHINES EVENT INORTH AMERICA ITO PROVIDE 50,000 CASH VALUE DIGITAL LITERACY TRAINING IN RWANDA

(i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** SPONSORSHIP 10,000 CASH VALUE (INCLUDING OF THE 2017 ICELAND & COPYCAMP GREENLAND) **IEVENT** TO RESEARCH 12.500 CASH VALUE **IEUROPE**

(INCLUDING THE IMPACT OF

Form 990 Schedule F Part II - Grants or Entities Outside The United States

DIGITAL

IADVERTISING

IICELAND & IGREENLAND)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) EUROPE SPONSORSHIP OF 12,000 CASH VALUE (INCLUDING THE GIG ICELAND & CONFERENCE GREENLAND) TRACK AT RE PUBLICA 2017 INORTH AMERICA ITO PROVIDE 97,235 CASH VALUE HANDS-ON IEDUCATION ON OPEN SOURCE IDEVELOPMENT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section of (c) Region (book, FMV, cash non-cash cash grant organization and EIN(If grant non-cash disbursement assistance appraisal, applicable) assistance other) 5,042 NORTH ITO OFFER FREE ICASH VALUE IAMERICA ICOMPUTER I **IEDUCATION** IWORKSHOPS TO IYOUTH SUB-SAHARAN ISPONSORSHIP OF 10,000 CASH VALUE AFRICA ITHE 2017 INTERNET

FREEDOM FORUM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** ITO SUPPORT THE 10,000 CASH VALUE (INCLUDING IEUROPEAN ICELAND & DIGITAL RIGHTS [GREENLAND] ICOMMUNITY. INORTH AMERICA ITO CREATE A 8,062 CASH VALUE ILOW COST. AFTERSCHOOL HANDS-ON MAKING IPROGRAM

(I) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **EUROPE** SPONSORSHIP 50,000 CASH VALUE (INCLUDING OF THE 2017 ICELAND & CITIZEN MEDIA [GREENLAND] SUMMIT ISUB-SAHARAN TO RESEARCH 10,000 CASH VALUE IAFRICA ISPS AND CENSORSHIP IN KENYA, ETHIOPIA, AND

Form 990 Schedule F Part II - Grants or Entities Outside The United States

UGANDA

(1) Method of (g) Amount of (h) Description l(b) IRS codel (f) Manner of valuation (e) Amount of (a) Name of (d) Purpose of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 250,000 ICASH VALUE **EUROPE** TO EXPLORE (INCLUDING HOW IOT BRINGS ICELAND & THE ISSUE OF GREENLAND) IONLINE PRIVACY INTO THE HOME FUROPE ISPONSORSHIP 10,838 ICASH VALUE (INCLUDING IOF EUROPEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States

IGET ONLINE

WEEK 2017

ICELAND &

GREENLAND)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (g) Amount of (h) Description l(b) IRS codel (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (book, FMV, (c) Region non-cash cash organization and EIN(If cash grant grant non-cash disbursement appraisal, assistance applicable) assistance other) FUROPE ITO SUPPORT A 130,000 ICASH VALUE (INCLUDING ICOLLABORATIVE ICELAND & IOT RESEARCH GREENLAND) PROJECT INORTH AMERICA TO MAP CYBER-6.134 CASH VALUE BULLYING WHILE TEACHING DIGI LITERACY TO IYOUTH & SKILLS

TO SENIORS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of I (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) INORTH ITO MAP CYBER-5,806 CASH VALUE IAMERICA IBULLYING lwhile TEACHING IDIGITAL

LITERACY TO

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (b) Region (c)Number (d) Amount of (e) Manner of cash (h) Method of (a) Type of grant or (f) Amount of (q) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) **FELLOWSHIP** 159,794 ELECTRONIC CASH VALUE INORTH STIPENDS FUND/WIRE IAMERICA TRANSFER **FELLOWSHIP** 176,682 ELECTRONIC CASH VALUE ISOUTH STIPENDS IFUND/WIRE IAMERICA TRANSFER

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S										
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
STIPENDS	EUROPE (INCLUDING ICELAND & GREENLAND)	8		ELECTRONIC FUND/WIRE TRANSFER			CASH VALUE			
CTIDENIDC	SUB-SAHARAN AFRICA	3		ELECTRONIC FUND/WIRE TRANSFER			CASH VALUE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S										
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
FELLOWSHIP STIPENDS	SOUTH ASIA	1	,	ELECTRONIC FUND/WIRE TRANSFER			CASH VALUE			
STIPENDS	MIDDLE EAST AND NORTH AFRICA	1	,	ELECTRONIC FUND/WIRE TRANSFER			CASH VALUE			

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -					DLI	N: 934933190	89328	
Schedule I (Form 990)		Governments	Other Assistand and Individual ation answered "Yes,"		0	MB No 1545-004 2017 Open to Public				
Department of the Treasury Internal Revenue Service	 ► Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at <u>www.irs.qov/form990</u>. 									
Name of the organization MOZILLA FOUNDATION							yer identifica 97189	ation number		
Part I General Info	ormation on Grants	and Assistance				I				
the selection criteria u Describe in Part IV the	ised to award the grants e organization's procedu	s or assistance ⁷ res for monitoring the u	se of grant funds in the U	nited States	for the grants or assistant		Part IV line	Yes 21 for any recip	□ No	
that received m	nore than \$5,000 Part I	I can be duplicated if ad	ditional space is needed		- 			 		
(a) Name and address of organization or government	of (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descri noncash as		(h) Purpose of or assistance	f grant	
(1) See Additional Data										
(2)										
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For Paperwork Reduction Act	Notice, see the Instruction	ons for Form 990.		Cat No 50055	5P		Scho	edule I (Form 990) 2017	

Schedule I (Form 990) 2017

(4)

(5)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

ımn (b); and any other a	3
ING DOCUMENTATION SUC URSUANT TO AGREEMENTS	١

(6) (7) Supplemental Information. Provide the information required in Part I, line 2; Part III, colu dditional information. Part IV Return Reference Explanation MOZILLA FOUNDATION MAINTAINS INFORMATION ON GRANTS, INCLUDING SUPPORT H AS GRANT PROPOSALS, SIGNED AGREEMENTS, REPORTS FROM GRANTEES. ETC FOR FELLOWSHIP GRANTEES, GRANTS ARE MADE PU WITH THE FELLOWS AND/OR HOST INSTITUTIONS TO ENSURE THAT THE FELLOWSHIP RECIPIENTS WILL BE PURSUING A DEFINED RESEARCH PROGRAM THAT WILL AID THE DEVELOPMENT OF THE FELLOWSHIP RECIPIENT AS WELL AS ADVANCING RESEARCH IN AREAS MATCHING MOZILLA FOUNDATION'S EXEMPT PURPOSES ALTHOUGH MOST OF OUR OTHER GRANTS ARE TO IRS-RECOGNIZED 501(C)(3) ORGANIZATIONS, WE SOMETIMES MAKE GRANTS TO OTHER ENTITIES AND INDIVIDUALS TO ACCOMPLISH SPECIFIC WORK IN

PART I, LINE 2 FURTHERANCE OF MOZILLA FOUNDATION'S PURPOSES IN THOSE CASES, WE ENTER INTO APPROPRIATE CONTRACTUAL AGREEMENTS REQUIRING THE GRANTEE TO ACCOMPLISH CHARITABLE WORK OF DIRECT BENEFIT TO THE PUBLIC AND SPECIFICALLY DESCRIBED IN THE STATEMENT OF WORK THESE AGREEMENTS REQUIRE THE GRANTEE TO REPORT ON THEIR USE OF FUNDS. Schedule I (Form 990) 2017

Page **2**

Additional Data

ASIAN AMERICAN

AUSTIN FREE-NET

AUSTIN, TX 78702

JOURNALISTS ASSOCIATION

5 THIRD STREET SUITE 1108

SAN FRANCISCO, CA 94103

2209 ROSEWOOD AVENUE

Software ID: Software Version:

EIN: 20-0097189

Name: MOZILLA FOUNDATION

5,000

5,000

CASH VALUE

CASH VALUE

(q) Description of

non-cash assistance

(h) Purpose of grant

SPONSORSHIP OF THE

LEADERSHIP PROGRAM

EDUCATION TO YOUNG

LATINAS AND THEIR

MOTHERS

AAJA EXECUTIVE

TO PROVIDE STEM

or assistance

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	ı
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501 (C) (3)

501 (C) (3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

95-3755203

74-2743446

(f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or aovernment assistance other) BIG BANG TO LLC 49-5880015 N/A 24,000 ICASH VALUE ITO BUILD A LOW COST OBOTICS ORM FOR USE IN

CURRICULUM WITH NYC

ISTUDENTS

1712 MAIN SUITE 324 KANSAS CITY, MO 64108				IOT ROE PLATFO K-12 ED

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10004

relling

					K-12 EDUCATION
BROOKLYN ON TECH	46-5336001	501 (C) (3)	20,000	CASH VALUE	TO PILOT AN OPEN
25 BROADWAY 12TH FLOOR					DIGITAL STORYTEL

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization arant cash non-cash assistance or assistance or government other) assistance 501 (C) (3) 39.000 CAPITAL OF TEXAS MEDIA 46-3398438 CASH VALUE TO CREATE AN ONLINE FOUNDATION MOCK CITY COUNCIL 1512 BROADMOOR DRIVE FOR STUDENTS TO AUSTIN, TX 78723 LEARN CIVICS, AND TO DEVELOP ACTIVITIES

AND APPS TO FOSTER WEB LITERACY LEARNING

10,000 CATOOSA COUNTY 58-2646207 501 (C) (3) CASH VALUE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TO PROVIDE PO BOX 130 INTERACTIVE SCIENCE RINGGOLD, GA 30736 EDUCATION USING

TECHNOLOGY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-3122281 501 (C) (3) 15.000 TO PREPARE BOYS OF CHANGING EXPECTATIONS ICASH VALUE COLOR FOR THE VR

PO BOX 1965 ROUND ROCK, TX 78680 CIVIC HALL LLC 47-4897004 501 (C) (3) 6,000 CASH VALUE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10011

WORKFORCE MEMBERSHIP PAYMENT 118 WEST 22ND STREET 12TH FLOOR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 501 (C) (3) 11.600 ICASH VALUE CIVICUS WORLD ALLIANCE 52-1847010 TO PROVIDE DIGITAL FOR PARTICIPATION INC SKILLS TRAINING TO 1775 EYE STREET NW SUITE CIVIL SOCIETY ORGS. AND FOR CAMPAIGNCON

1150 WASHINGTON, DC 20006 PARTICIPATION FEE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FOR NON PROFIT LEADERS 34-6565428 10.000 CLEVELAND PUBLIC LIBRARY 501 (C) (3) CASH VALUE

TO PROVIDE DIGITAL 325 SUPERIOR AVENUE LITERACY TRAINING TO CLEVELAND, OH 44114 LIBRARIANS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 13-4162016 501 (C) (3) 14.000 CODEINTERACTIVE ICASH VALUE TO PROVIDE PEER TECH EDUCATION TO NYC

25 BROADWAY 12TH FLOOR STUDENTS NEW YORK, NY 10004 COMMUNITY PARTNERS 95-4302067 501 (C) (3) 15,000 CASH VALUE SPONSORSHIP OF 2017

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90012

1000 N ALAMEDA STREET ISRCCON WORK SUITE 240

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 36-3467921 501 (C) (3) 5.000 ICASH VALUE SPONSORSHIP OF CONTEXTURE MEDIA

NETWORK CREATIVE TECH EXPO 913 N MARKET STREET SUITE 200 WILMINGTON, DE 19801

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOS ANGELES, CA 90074

CREATIVE COMMONS 04-3585301 501 (C) (3) 10,000 ICASH VALUE SPONSORSHIP OF 2017 PO BOX 741107 CREATIVE COMMONS

IGLOBAL SUMMIT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) F4 YOUTH 46-2878544 501 (C) (3) 15.000 ICASH VALUE TO EXPOSE STUDENTS SIGN THINKING ECH CAREERS JGH VR

IRURAL YOUTH

TOGETHER TO BRIDGE DIGITAL DIVIDES

4302 AIRPORT BOULEVARD AUSTIN, TX 78722					TO DESIGN THINKING AND TECH CAREERS THROUGH VR
EDUCATION VIDEO CENTER	13-3378456	501 (C) (3)	26,000	 CASH VALUE	TO BRING URBAN AND

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

201 (C) (3) 16 CLARKSON STREETNO 401

NEW YORK, NY 10014

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) EYEBEAM ATELIER INC 13-3378456 501 (C) (3) 6.000 CASH VALUE TRAVEL GRANT FOR PO BOX 220532 STAFF MEMBER AND BROOKLYN, NY 11222 STUDENT TO ATTEND MOZFEST, AND TO PURCHASE EQUIPMENT FOR EYEBEAM'S DIGITAL LEARNING PROGRAM STUDIO

CAPACITY AND DIVERSIFY FUNDING

STREAMS

GLOBAL ACTION PROJECT 11-3425000 501 (C) (3) 23,000 CASH VALUE TO PILOT A MODEL FOR YOUTH-PRODUCED RAPID RESPONSE MEDIA IN NYC, AND TO HELP INCRASE FUNDRAISING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 501 (C) (3) 17.990 GLOBAL KIDS INC 13-3629485 CASH VALUE TO SUPPORT A STEM **EVIE HANTZOPOULOS 137** PROGRAM FOR YOUTH FAST 25TH ST AGES 14-18, AND FOR NEW YORK, NY 10010 A TRAVEL GRANT TO ATTEND THE 2017 ESRI EDUCATION GIS CONFERENCE 45-5351484 501 (C) (3) 25.000 CASH VALUE SPONSORSHIP OF A

THE TOPIC OF MISINFORMATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

HACKS HACKERS 61 JANE STREET MISINFOCON AT MIT, AND TO PRODUCE NEW YORK, NY 10014 IGLOBAL EVENTS ON

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance

CASH VALUE

TO USE GIG

IA CONTRIBUTING

MEMBER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (3)

62-0929459

HAMILTON COUNTY

PARKWAY 5TH FLR

LAKEMARY, FL 32746

3074 HICKORY VALLEY ROAD CHATTANOOGA, TN 37421						TECHNOLOGY FOR TEACHER PROFESSIONAL LEARNING
IMS GLOBAL LEARNING 801 INTERNATIONAL	04-3489277	501 (C) (3)	15,000	CASH VALUE	1	TO SPONSOR ANNUAL MEMBERSHIP DUES FOR

10.000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 34-1996112 501 (C) (3) 12.000 INNOVATE OREGON ICASH VALUE TO INCREASE THE 123 NE 3RD AVENUE SUITE NUMBER OF WOMEN IN

THE TECH SECTOR 210 EUGENE, OR 97232 INTEGRATED ARTS 47-2571430 501 (C) (3) 16,000 TO CREATE AN ICASH VALUE 30893 BLANTON ROAD INTERACTIVE MIXED-MEDIA ART

EUGENE, OR 97405 INSTALLATION IN EUGENE, OR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 22-3087809 501 (C) (3) 20.000 ICASH VALUE INTERNATIONAL RESEARCH ISPONSORSHIP OF THE AND EXCHANGES BOARD 2017 INTERNET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1275 K STREET NW SUITE 600 WASHINGTON, DC 20005

FREEDOM FORUM INTERNATIONAL SOCIETY FOR 52-2093854 501 (C) (3) 5.000 ICASH VALUE SPONSORSHIP OF 2017 COMPUTATIONAL BIOLOGY ICSB AFRICA ASBCB 9650 ROCKVILLE PIKE CONFERENCE ON

BETHESDA, MD 20814 BIOINFOMATICS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance INTERNET SYSTEM 20-0141248 501 (C) (3) 10 000 CASH VALUE TO CONNECT DIGITAL Y EXPERTS TO

950 CHARTER STREET REDWOOD CITY, CA 94063					ORGANIZA
CONSORTIUM					SECURITY
INTERNET STATES	20 01-12-0	301 (0) (3)	10,000	CASIT VALUE	I TO COMME

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

141 NEFF ANNEX COLUMBIA, MO 65211

CIFTY ZATIONS 9.400 ISPONSORSHIP OF 2017 INVESTIGATIVE REPORTERS 51-0166741 501 (C) (3) ICASH VALUE AND EDITORS INC NICAR

organization or government if applicable grant cash or government cash or government or government cash other)

(e) Amount of non-

(f) Method of valuation

ICASH VALUE

(g) Description of

(h) Purpose of grant

EDUCATORS AND CERN

SCIENTISTS TO CREATE

TO PARTNER

ISTEM LESSONS

INVESTIGATIVE REPORTERS	51-0166741	501 (C) (3)	10,000	CASH VALUE	TO SUPPORT TRAVEL OF
AND EDITORS INC					SESSION HOSTS TO
1275 K STREET NW SUITE 600					THE INTERNET
WASHINGTON, DC 20005					FREEDOM FESTIVAL

24.000

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (3)

(c) IRC section

(a) Name and address of

KC METROPOLITAN EDTECHNET

7606 NW 73RD COURT

KANSAS CITY, MO 64152

(b) EIN

20-5496239

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance SEARCH HOW HOUSING

CURRICULUM FOR

DTSMA STUDENTS

KU ENDOWMENT	20-0317170	501 (C) (3)	21,000	CASH VALUE	TO RESE
PO BOX 928					SMART H
LAWRENCE, KS 66044					DESIGN
					POPULAT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

805 TEURI INGS DRIVE

LAFAYETTE.LA 70501

N CAN SUPPORT ATION HEALTH 72-6000625 170 (C) (1) 15.000 ICASH VALUE LAFAYETTE PARISH SCHOOL TO DEVELOP STEM SYSTEM EDUCATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 23-7086419 501 (C) (3) 15.000 ICASH VALUE TO DEVELOP A VR LAFAYETTE SCIENCE MUSEUM FOUNDATION IGAME FOR STUDENTS

433 JEFFERSON STREET LAFAYETTE.LA 70501

EUGENE, OR 97401

TO LEARN ABOUT

COASTAL EROSION 93-0681430 501 (C) (3) 15.000 ICASH VALUE TO TEACH STUDENTS LANE ARTS COUNCIL 1590 WILLAMETTE STREET STORYTELLING USING

SUITE 200 IGIGABIT TECHNOLOGY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization arant cash non-cash assistance or assistance or government other) assistance 31-1622209 501 (C) (3) 28.000 CASH VALUE TO DEVELOP LANE EDUCATION SERVICE DISTRICT IELEMENTARY SCHOOL 1200 HIGHWAY 99 NORTH STEM EDUCATION EUGENE, OR 97402 CURRICULA

TO ALLOW LATINA
GIRLS TO PRODUCE
FILMS ABOUT AUSTIN'S

EAST SIDE

EUGENE, OR 97402

LATINITAS INC 77-0603754 501 (C) (3) 10,000

4926 E CESAR CHAVEZ
STREET
AUSTIN, TX 78702

CASH VALUE

TO PROVIDE STEM
LESSONS TO GIRLS
LIVING IN AUSTIN
PUBLIC HOUSING, AND

4926 E CESAR CHAVEZ
STREET
AUSTIN, TX 78702

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 7.900 MASSACHUSETTS INSTITUTE 04-2103594 501 (C) (3) ICASH VALUE ISPONSORSHIP WORLD OF TECHNOLOGY WIDE WEB ICONSORTIUM MEMBER EVENTS

TRAINING USING AR TECHNOLOGY

77 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

82-1181278 N/A 15.000 MEDCOGNITION ICASH VALUE TO PILOT EMERGENCY FIRST RESPONDER

18106 SETTLEMENT WAY

SAN ANTONIO, TX 78258

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance 22 244222 B1 / A 20.000 CDONICODCLITO OF

57 EAST 11TH STREET NEW YORK, NY 10003	32-0449898	N/A	20,000	CASH VALUE	MEDIA PARTY BUENOS AIRES FAKE NEWS TRACK
METROPOLITAN NEW YORK	13-6210582	170 (C) (1)	10,000	CASH VALUE	TO PROVIDE DIGITAL

±, 0 (C) (±) LIBRARY COUNCIL 57 EAST 11TH STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10003

LITERACY TRAINING TO LIBRARIANS FOURTH FLOOR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance MIT MEDIA LAB 04-2103594 501 (C) (3) 20.000 ICASH VALUE IGENERAL SUPPORT

E14-245 CAMBRIDGE, MA 02139					
MOTION MEDIA ARTS CENTER 2200 TILLERY STREET	36-4533347	501 (C) (3)	15,000	CASH VALUE	TO CONNECT STUDENTS FROM TEXAS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

77 MACCACHICETTC AVENUE

AUSTIN, TX 78723 IAND MEXICO TO ICREATE A 4K SHORT

FILM

ıf applıcable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(e) Amount of non-

(f) Method of valuation

CASH VALUE

(g) Description of

(h) Purpose of grant

CON EVENT SPONSORSHIP

TO EXPAND FINANCIAL

EDUCATION PROGRAM

LOW-INCOME YOUTH

THROUGH TECH

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (3)

(c) IRC section

MOUSE INC	13-3973196	501 (C) (3)	12,894	CASH VALUE	TO PROVIDE
55 BROAD STREET 16TH					TECHNOLOGY
FLOOR					EDUCATION TRAINING
NEW YORK, NY 10004					TO NYC TEACHERS, TO
,					SUPPORT
					PROFESSIONAL
					DEVELOPMENT
					ACTIVITIES FOR MOUSE
					STAFF, AND EMOTI-

12,000

DEVELOPMENT FORUM

SPRINGFIELD, OR 97477

212 MAIN STREET

NEIGHBORHOOD ECONOMIC

(a) Name and address of

(b) EIN

93-0739188

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance

RESEARCH ON PUBLIC

INTEREST

TECHNOLOGY

NEW AMERICA	52-2096845	501 (C) (3)	20,700	CASH VALUE	TO CONDUCT
NETROOTS FOUNDATION 4741 CENTRAL STREET SUITE 377 KANSAS CITY, MO 64112	20-8672843	501 (C) (3)	10,000	CASH VALUE	TO SUPPORT THE 2017 NETROOTS NATION TRAINING PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

740 15TH STREET NW SUITE

WASHINGTON, DC 20005

900

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 36-2167817 10.000 CASH VALUE NORTHWESTERN UNIVERSITY 170 (C) (1) SPONSORSHIP OF 1800 SHERIDAN ROAD COMPUTATION & JOURNALISM 2017 SYMPOSIUM SPONSORSHIP OF

EVANSTON, IL 60208 51-0389878 501 (C) (3) 12.500 ONLINE NEWS ASSOCIATION ICASH VALUE 1111 NORTH CAPITOL ST NE ONA17

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6TH FIR

WASHINGTON, DC 20002

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 03-0609146 501 (C) (3) 40.000 PENPAL SCHOOLS CASH VALUE ITO ENGAGE STUDENTS

PERSONAL DEMOCRACY

FORUM 2017

PERSONAL DEMOCRACY MEDIA	13-3981027	N/A	25.000	CASH VALUE	SPONSORSHIP OF
411 WEST MONROE STREET AUSTIN, TX 78704		, , , ,			IN VR FIELD TRIPS TO LEARN ABOUT THE WORLD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

118 WEST 22ND STREET 12TH

NEW YORK, NY 10011

FLOOR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

PROVIDENCE PUBLIC LIBRARY 150 EMPIRE STREET PROVIDENCE, RI 02903	05-0262713	501 (C) (3)	14,000	CASH VALUE		TO PROVIDE DIGITAL LITERACY TRAINING TO LIBRARIANS
					i	

RIVER CITY YOUTH 74-2270453 501 (C) (3) 15,000 CASH VALUE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AUSTIN, TX 78760

TO PROVIDE STEM FOUNDATION IEDUCATION TO LOW-PO BOX 17923 INCOME STUDENTS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 41-2203632 501 (C) (3) 10,000 GENERAL SUPPORT SOFTWARE FREEDOM ICASH VALUE

STEM FROM DANCE	46-1793936	501 (C) (3)	12,200	CASH VALUE	TO PROVIDE STE
CONSERVANCY 137 MONTAGUE STREET SUITE 380 BROOKLYN, NY 11201					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BROOKLYN, NY 11225

590 FLATBUSH AVENUE APT 10 EDUCATION TO LOW-

INCOME, MINORITY

GIRLS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization arant cash non-cash assistance or assistance or government other) assistance 81-4026359 N/A 12.000 CASH VALUE TO SUPPORT PEER STUDIO MINDSTRIDE 100 CHEROKEE BOULEVARD EDUCATION FOR YOUTH TO LEARN CODING AND **SUITE 3003**

CONFERENCE

CHATTANOOGA, TN 37405 BUILD TOOLS TECH KIDS UNLIMITED 46-2451747 501 (C) (3) 23.960 CASH VALUE TO PILOT A TECH 2 METROTECH CENTER 8TH INTERNSHIP FOR TEENS FLOOR WITH AUTISM SPECTRUM DISORDER, BROOKLYN, NY 11201

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TRAVEL GRANT TO ATTEND 2017 CROSSROADS STEM

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 11-3625306 501 (C) (3) 22,201 CASH VALUE TO PILOT THE DIGITAL THE CENTER FOR URBAN PEDAGOGY CITY STUDIES 232 THIRD STREET D201 PROGRAM FOR YOUTH BROOKLYN, NY 11215 IN NYC. AND TO PURCHASE RECORDING **EQUIPMENT TO EXPAND** COMMUNITY PROGRAMS

ARTS EDUCATION
ACROSS CHATTANOOGA

AND BEYOND

THE ENTERPRISE CENTER
1100 MARKET STREET SUITE
500
CHATTANOOGA, TN 37402

EQUIPMENT TO EXPAND COMMUNITY PROGRAMS

TO USE 4K
TECHNOLOGY TO STREAM EDUCATIONAL CONTENT TO CONTENT TO CLASSROOMS, AND TO EXPAND ACCESS TO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (3)

THE FUND FOR THE CITY OF NEW YORK 121 AVENUE OF THE AMERICAS 6TH FLR NEW YORK, NY 10013	13-2612524	501 (C) (3)	28,500		CASH VALUE		SPONSORSHIP OF 2017 22X20 SUMMIT , TRAVEL GRANT TO ATTEND THE 97TH NCSS ANNUAL CONFERENCE, TO PURCHASE EQUIPMENT TO SUPPORT DIGITAL MEDIA LEARNING PROGRAMS, AND
---	------------	-------------	--------	--	------------	--	--

26,000

CASH VALUE

BETANYC'S NYC SCHOOL OF DATA 2017 EVENT SPONSORSHIP

STUDENTS

TO PROVIDE PEER TECH EDUCATION TO NYC

47-2747713

THE KNOWLEDGE HOUSE

1231 LAFAYETTE AVENUE BRONX, NY 10474

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(e) Amount of non-

(f) Method of valuation

CASH VALUE

(g) Description of

(h) Purpose of grant

TO STUDY OF

WEBSITE COMMUNITIES

COLOR ON NEWS

BEHAVIOR WOMEN OF

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

170 (C) (1)

(c) IRC section

THE POINT CDC	13-3765140	501 (C) (3)	26,000	C/	ASH VALUE	TO PROVIDE HANDS-ON
940 GARRISON AVENUE						STEM EDUCATION TO
BRONX, NY 10474						NYC YOUTH, AND TO
						PROVIDE TECH
						RESOURCES/TRAINING
						IN PR AFTER
						HURRICANE MARIA

15.649

THE UNIVERSITY OF NORTH TEXAS

PO BOX 76203

DENTON.TX 76203

(a) Name and address of

(b) EIN

23-7232618

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance THEATRE ACTION PROJECT 95-4710054 501 (C) (3) 5.000 CASH VALUE TO DEVELOP VR ES TO OUTH

LITERACY TRAINING TO

LIBRARIANS

2921 E 17TH STREET BLDG B BOX 7 AUSTIN, TX 78702					EXPERIENCES TO ENHANCE YOUTH LEARNING
TOLEDO LUCAS COUNTY	34-1632308	501 (C) (3)	10,000	CASH VALUE	TO PROVIDE DIGITAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PUBLIC LLIBRARY

TOLEDO, OH 43604

35 NORTH MICHIGAN STREET

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance TRINITY ANIMATION 43-1801531 N/A 5.000 CASH VALUE TO DEVELOP A VR

672 SE BAYBERRY LANE KANSAS CITY, MO 64063		·	,		ENVIRONMENT FOR MEDICAL EDUCATION
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3420 WALNUT STREET SUITE 240	23-1352685	501 (C) (3)	20,000	CASH VALUE	SPONSORSHIP OF DATA RESCUE EVENTS AT UPENN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PHILADELPHIA, PA 19104

if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance

(e) Amount of non-

(f) Method of valuation

CASH VALUE

(g) Description of

(h) Purpose of grant

TO CREATE VR

EXPERIENCES TO INTEREST MIDDLE

SCHOOLERS IN STEM

UNIVERSITY OF LOUISIANA AT	72-6023836	501 (C) (3)	25,000	CASH VALUE	TO PROVIDE COLLEGE
LAFAYETTE					ORIENTATION TO
ASHLEY DUGAS SUITE 307 FG					STUDENTS USING A 4K
MOUTON					VIDEO STREAM, AND
HALL					TO PROMOTE LEARNING
LAFAYETTE, LA 70504					THROUGH NETWORKED
					VR FIELD TRIP

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

170 (C) (1)

(c) IRC section

(a) Name and address of

UNIVERSITY OF TEXAS

FOUNDATION

PO BOX 250 AUSTIN, TX 78767 **(b)** EIN

74-1587488

LAIAILIIL				ONILIVIATION TO
ASHLEY DUGAS SUITE 307 FG				STUDENTS USING A 4K
MOUTON				VIDEO STREAM, AND
HALL				TO PROMOTE LEARNING
LAFAYETTE, LA 70504				THROUGH NETWORKED
				VR FIELD TRIP
				TECHNOLOGY

5,000

(a) Name and address of **(b)** EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 45-4946198 501 (C) (3) 23.000 TO USE IOT TO URBAN FARMING GUYS ICASH VALUE 3700 EAST 12TH STREET EDUCATE THE TOOD:

FOR LANGUAGE LEARNING

				SYSTEMS AND URBAN FARMS
KANSAS CITY, MO 64127				COMMUNITY ON FOOD
3700 LAST IZITI STREET				ILDOCATE THE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHATTANOOGA, TN 37415

81-4171923 N/A 15,000 TO DEVELOP A VIATOR VR LLC ICASH VALUE 1102-621 MEMORIAL DRIVE CURRICULUM USING VR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance WILDLIFE CONSERVATION 13-1740011 501 (C) (3) 19,704 ICASH VALUE TO PILOT THE DIGITAL

LIBRARIANS

SOCIETY 2300 SOUTHERN BOULEVARD BRONX, NY 10460					CITY STUDIES PROGRAM FOR YOUTH IN NYC
WILLOUGHBY-EASTLAKE PUBLIC LIBRARY	47-3623281	501 (C) (3)	10,000	CASH VALUE	TO PROVIDE DIGITAL LITERACY TRAINING TO

PUBLIC LIBRARY 35150 LAKESHORE

BOULEVARD EASTLAKE, OH 44095

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant **(b)** EIN (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 47-1428936 N/A 19.000 YOUTH POWERED LLC ICASH VALUE TO CREATE VR FIELD 3518 WAYNE AVENUE TRIPS TO LANDMARKS KANSAS CITY, MO 64109 ITMPORTANT TO BLACK

HISTORY

efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed Data - DLN: 9	349331	19089	328					
Sch	edule J	Compensation Information	OMB No	1545-	0047					
(For	ո 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest								
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.								
	▶ Attach to Form 990.									
	tment of the Treasury al Revenue Service	► Information about Schedule J (Form 990) and its instructions is at <pre>www.irs.qov/form990.</pre>	Open i	to Pul ectio						
Nar	ne of the organiza	ation Employer identific								
MOZ	ZILLA FOUNDATION	20-0097189								
Pa	rt I Questi	ons Regarding Compensation								
				Yes	No					
1a		opiate box(es) if the organization provided any of the following to or for a person listed on Form ection A, line 1a Complete Part III to provide any relevant information regarding these items								
	First-class	s or charter travel Housing allowance or residence for personal use								
	_	companions ————————————————————————————————————								
		nification and gross-up payments Health or social club dues or initiation fees								
	☐ Discretion	eary spending account Personal services (e g , maid, chauffeur, chef)								
b		xes in line 1a are checked, did the organization follow a written policy regarding payment or reimburseme all of the expenses described above? If "No," complete Part III to explain	nt 1b							
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all les, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2							
	directors, truste	es, officers, including the CEO/Executive Director, regarding the items checked in line 1a/								
3		If any, of the following the filing organization used to establish the compensation of the								
		EO/Executive Director Check all that apply Do not check any boxes for methods and organization to establish compensation of the CEO/Executive Director, but explain in Part III								
	_									
		ation committee Written employment contract Compensation curvey or study								
		of other organizations Solution Solvey of Study Approval by the board or compensation committee								
4	During the year, related organiza	, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or ition	a							
а	_	ance payment or change-of-control payment?	4a		No					
b		r receive payment from, a supplemental nonqualified retirement plan?	4b		No					
c	•	r receive payment from, an equity-based compensation arrangement?	4c		No					
	If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III								
	0) F04/-)/4) and F04/-)/30) annoting the national annulate lines F 0								
5), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any								
,		ontingent on the revenues of								
а	The organization	٦٦	5a		No					
b	Any related orga	anization?	5b		No					
	If "Yes," on line	5a or 5b, describe in Part III								
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any ontingent on the net earnings of								
а	The organization	٦٦	6 a		No					
b	Any related orga		6b		No					
	•	6a or 6b, describe in Part III								
7		ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed escribed in lines 5 and 6? If "Yes," describe in Part III	7		No					
8		nts reported on Form 990, Part VII, paid or accured pursuant to a contract that was nitial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe								
			8		No					
9	If "Yes" on line 8 53 4958-6(c)?	8, did the organization also follow the rebuttable presumption procedure described in Regulations section	9							
For D		uction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Schedule		, 000)	2017					

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report of	compensation fro	m the organization	on row (1) and fro	m related organiza	tions described i	n the		
instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII							
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total								
(A) Name and Title	(B) Break	kdown of W-2 and/c compensation	or 1099-MISC	(C) Retirement and other deferred	(D) Nontaxable benefits	columns	(F) Compensation in	
	compensation Bonus & incentive		(iii) Other reportable compensation	compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table								
	-							

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017

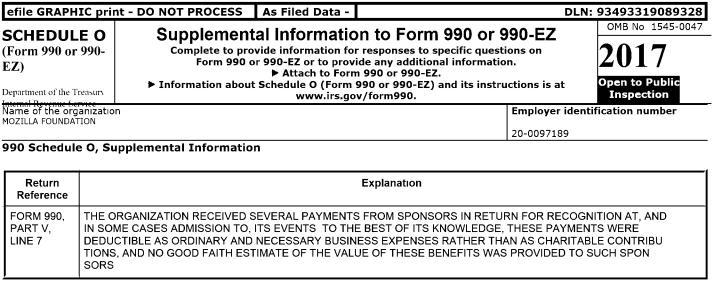
Additional Data)							
			Software ID: Software Version:					
			EIN:	20-0097189				
			Name:	MOZILLA FOUNDATIO	N			
	J, I		rectors, Trustees, Ke		-			T
(A) Name and Title	-		of W-2 and/or 1099-MISC	· · · · · · · · · · · · · · · · · · ·	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B)
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	belletits	(3)(1)-(0)	reported as deferred on prior Form 990
1MITCHELL BAKER CHAIR PAID ONLY BY RELATED	(1)	0	o	0	0	0	C	0
FOR-PROFIT	(11)	450,000	180,000	1,664,667	24,000	27,359	2,346,026	0
1MARK SURMAN EXECUTIVE	(1)	235,829	0	0	16,218	12,498	264,545	0
DIRECTOR/DRESIDENT	(11)	0		0				
2	(1)	0	0	0	0	0	0	0
JIM COOKTREAS THRU 53117	(11)	401,250	160 500	660 500	34,000		1 376 150	
PAID ONLY BY RELATED FOR-PROFIT	`'']	101,230	160,500	660,500	24,000	29,909	1,276,159	
3ANGELA PLOHMAN EXECUTIVE VP, SECRETARY,	(1)	163,862	0	0	11,204	10,875	185,941	. 0
TREASURER	(11)	0	0	0	0	0		0
4CHRISTOPHER LAWRENCE VP LEADERSHIP NETWORK	(1)	206,000	0	0	14,894	74,431	295,325	0
VP LEADERSHIP NETWORK	(11)	0		0	0	0		
5 ACHIEV BOYD EDOM 040247	(1)	179,511	0	0	12,566	39,240	231,317	, 0
ASHLEY BOYD FROM 010317 VP ADVOCACY	(11)	0						
6MICHAEL AUKLAND	(1)	126,412	0	0	9,050	45,893	181,355	0
DIRECTOR, HUMAN RESOURCES	(11)	0						
7 AN-ME CHUNG	(1)	154,369	0	0	10,937	60,082	225,388	0
SR FELLOW, INTERNET HEALTH ISSUES	(11)	0						
8HIRAM PAUL JOHNSON	(1)	142,941	0	0	10,242	60,068	213,251	0
DIRECTOR, ISSUES MARKETING					10,242			
9MATTHEW WILLSE	(II)	109,232	0	0				0
DESIGN MANAGER	(I)	109,232	0	0	8,113	71,337	188,682	0
İ	(11)	0	0	0	0	0	[c	0

7,975

59,163

184,409

10WILLIAM EASTON LEAD, FUND & EMAIL STRAT 117,271



Return Explanation
Reference

FORM 990,	THE FOUNDATION AMENDED ITS BYLAWS TO CLARIFY THAT ITS TREASURER DOES NOT HAVE A DUTY TO MA
PART VI,	NAGE OR OVERSEE THE FINANCIAL AFFAIRS OF MOZILLA CORPORATION, AND IS ALLOWED TO RELY ON IN
SECTION A,	FORMATION PROVIDED BY MOZILLA CORPORATION'S MANAGEMENT ABOUT MOZILLA CORPORATION'S FINANCI
LINE 4	AL AFFAIRS

Return Explanation
Reference

FORM 990, THE AUDIT COMMITTEE PERIODICALLY MEETS IN EXECUTIVE SESSION ALTHOUGH SEPARATE MEETING MIN UTES ARE NOT KEPT, IT REPORTS BACK TO THE FULL BOARD WHERE MEETING MINUTES ARE KEPT SECTION A, LINE 8B

Return Explanation

FORM 990,	SEVERAL INDIVIDUALS ASSOCIATED WITH THE ORGANIZATION DILIGENTLY GATHER AND PREPARE ALL DAT
PART VI,	A AND NARRATIVE EXPLANATIONS TO ACCURATELY COMPLETE IRS FORM 990 SEVERAL DRAFTS OF THE FO
SECTION B,	RM 990 ARE REVIEWED AND EDITED BY MANAGEMENT, OFFICERS AND ITS OUTSIDE COUNSEL AND ACCOUNT
LINE 11B	ANTS ALL DIRECTORS RECEIVE A FINAL COPY OF THE 990 PRIOR TO FILING

990 Schedule O, Supplemental Information

Return
Reference

Explanation

THE FOUNDATION ANNUALLY ASKS BOARD MEMBERS AND KEY EMPLOYEES TO RESPOND TO A QUESTIONNAIRE

SECTION B,	DETAILING POTENTIAL CONFLICTS OF INTEREST INDIVIDUALS ARE TO REPORT ANY POTENTIAL CONFLICTS WITH RESPECT TO PARTICULAR DECISIONS AS THEY ARISE, AND IF THE BOARD DETERMINES THAT A CONFLICT EXISTS, THE CONFLICTED INDIVIDUAL DOES NOT PARTICIPATE IN VOTING ON THAT DECISION (AND IN SOME CASES THE FOUNDATION MAY NOT PURSUE THE TRANSACTION AT ALL) WHILE THE FOUNDATION HAS NOT ENGAGED IN ADDITIONAL MONITORING OR ENFORCEMENT BEYOND THIS, IT BELIEVES IT S EXISTING MECHANISMS HAVE BEEN ADEQUATE TO PROTECT AGAINST CONFLICTS OF INTEREST AFFECTIN
	G THE BOARD'S DECISION MAKING

FORM 990.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD OF DIRECTORS DETERMINED THE EXECUTIVE DIRECTOR'S COMPENSATION AFTER TAKING INTO ACCOUNT ASSESSMENTS OF HIS INDIVIDUAL PERFORMANCE AND THAT OF THE ORGANIZATION AS A WHOLE, ALONG WITH MARKET DATA ABOUT EXECUTIVE COMPENSATION AT SIMILAR ORGANIZATIONS DRAWN FROM B OTH GENERAL SURVEYS AND THE FORMS 990 FOR A SET OF PEER INSTITUTIONS THE EXECUTIVE DIRECT OR AND INTERESTED PARTIES WERE ABSENT FROM THE FINAL BOARD DISCUSSION, AND THE DETERMINATI ON WAS ULTIMATELY APPROVED BY A COMMITTEE OF THE BOARD OF DIRECTORS NOT INCLUDING ANYONE W ITH A CONFLICT OF INTEREST REGARDING THE COMPENSATION PACKAGE THE PROCESS AND THE DATA ON WHICH THE DECISION WAS MADE IS DOCUMENTED IN THE MINUTES OF THE ORGANIZATION

Return Explanation
Reference

FORM 990, THE FORMS 990, 990-T, AND THE FORM 1023 IN THEIR ORIGINAL FORM ARE AVAILABLE UPON REQUEST

PART VI, WE ALSO MAKE THESE FORMS AVAILABLE ONLINE, ALONG WITH OUR FINANCIAL STATEMENTS AND GOVERN

SECTION C, ING DOCUMENTS, EXCEPT THAT TO PROTECT INDIVIDUAL PRIVACY SOME PERSONAL ADDRESS INFORMATION

LINE 19 IS REDACTED FROM THE VERSION MADE AVAILABLE ONLINE

Explanation Return Reference

FORM 990. BENEFIT (PROVISION) FOR INCOME TAXES 60,000 PART XI,

LINE 9

990 Schedule O, Supplemental Information

Return Reference	Explanation
TANGIBLE PROPERTY REGULATIONS	SECTION 1 263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION TAXPAYER IS MAKING THE DE MINIMIS SAFE HARBOR ELECTION UNDER TREAS REG 1 263(A)-1(F) FOR ALL ELIGIBLE AMOUNTS PAID OR INCU RRED DURING THE TAXABLE YEAR SECTION 1 263(A)-3(N) CAPITALIZATION ELECTION TAXPAYER HER EBY ELECTS TO CAPITALIZE REPAIR AND MAINTENANCE COSTS UNDER TREAS REG 1 263(A)-3(N) THE COSTS WERE INCURRED DURING THE TAXABLE YEAR IN THE ELECTING TAXPAYER'S TRADE OR BUSINESS AND THE ELECTING TAXPAYER TREATS SUCH COSTS AS CAPITAL EXPENDITURES ON ITS BOOKS AND RECOR DS

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -										DLN: 93493	319089	328
SCHEDULE R (Form 990)		Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.								20	1545-004 17	17	
Department of the Treasury Internal Revenue Service	► Information about So	hedule l				s is at <u>www</u>	.irs.gov/f	orm99(<u>o</u> .		Open to	o Public ection	С
Name of the organization MOZILLA FOUNDATION								Emp	loyer identif	icatior	n number		
- Industrial Control								20-0	097189				
Part I Identification	of Disregarded Entities Complete if the	ne organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3	3.					
Name, address, and	(a) Name, address, and EIN (if applicable) of disregarded entity			ctivity	(c) Legal domicile (state or foreign country)		(d) Total income		(e) End-of-year assets		(f Direct co ent		
Part II Identification of related tax-exen	of Related Tax-Exempt Organizations onpt organizations during the tax year.	Comple	ete if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	/, line 34 be	cause	it had one or	more	
Name, address, an	(a) d EIN of related organization	(b) Primary activity		Legal dom	(c) (d) micile (state gn country)		de section Public		(e) ublic charity status section 501(c)(3))		(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled ty?
												Yes	No
For Panerwork Reduction Ac	t Notice, see the Instructions for Form 99	0		Ca	t No 5013	<u> </u> 35Y				Sch	edule R (Form	990) 20	117

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
] ""			Yes	No]	Yes	No	
											\vdash	
							<u> </u>			_	\vdash	
							<u> </u>			-	\vdash	
Part IV Identification of Related Organizations Taxable because it had one or more related organizations tre					zation ansv	vered "Yes	s" on Fo	orm 9	90, Part IV,	line	34	
(a) (b)		c)	(d		3	(f)		(g)	(1	1)		(i)
(a)		·)		יי ופ	, l	117	I	(9)		'/	- 1	. (')

Part IV Identification of Related Orga because it had one or more related						answered "Yes	ı l l " on Form 99	00, Part IV, lın	e 34		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Direct co ent	ntrolling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-o year assets	(h) f- Percentag ownershi	p	(i) Section (b)(: contro entit	n 512 13) olled
(1)MOZILLA CORPORATION 331 EAST EVELYN AVENUE MOUNTAIN VIEW, CA 94041 20-3226186	INTERNET SERVICES	CA	MOZILLA	ION C		540,076,115	569,032,23	100 000 %		Yes	
								Schedule R (Fo)rm 99	0) 20	17

(1)MOZILLA CORPORATION

(2)MOZILLA CORPORATION

(3)MOZILLA CORPORATION

(4)MOZILLA CORPORATION

I Performance of services or membership or fundraising solicitations for related organization(s) . . .

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

Name of related organization

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses . . .

r Other transfer of cash or property to related organization(s) . . .

Schedule R (Form 990) 2017					
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	,				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	No	
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		1a	Yes		
b Gift, grant, or capital contribution to related organization(s)		1b		No	
c Gift, grant, or capital contribution from related organization(s)		1c		No	
d Loans or loan guarantees to or for related organization(s)		1d		No	
e Loans or loan guarantees by related organization(s)		1e		No	
f Dividends from related organization(s)		1f	Yes		
g Sale of assets to related organization(s)		1 g	\neg	No	
h Purchase of assets from related organization(s)		1h		No	
i Exchange of assets with related organization(s)		1i		No	
j Lease of facilities, equipment, or other assets to related organization(s)	•	1j		No	
k lease of facilities, equipment, or other assets from related organization(s).	_	1k		No	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

М

N

(b)

Transaction

type (a-s)

(c)

Amount involved

10,073,509

128,040

412,386

91.198

11

10

1r

Schedule R (Form 990) 2017

(d)

Method of determining amount involved

TRADEMARK LICENSE AGREEMENT

SERVICE AGREEMENT

SERVICE AGREEMENT

CASH VALUE

1m Yes 1n Yes No

No

No No

No

No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See instructions regarding excussion or certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2017

Schedule R (Form 990) 2017 Page **5** Part VII **Supplemental Information** Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation SCHEDULE R, PART V, LINE 2 THE FOUNDATION LICENSES CERTAIN TRADEMARKS TO ITS WHOLLY-OWNED SUBSIDIARY, MOZILLA CORPORATION, IN RETURN FOR A LICENSE FEE THE AMOUNT ACTUALLY RECEIVED BY THE FOUNDATION IS REPORTED ON PART V LINE 2(1) THE FOUNDATION ALSO HAS AN ADMINISTRATIVE SERVICES AGREEMENT UNDER WHICH MOZILLA CORPORATION PROVIDES LEGAL AND CERTAIN OTHER SERVICES, AS WELL AS ALLOWING IT TO USE SPACE IN MOZILLA

CORPORATION'S OFFICES ITS PAYMENT FOR SERVICES IS REPORTED ON PART V LINE 2(2), AND THE COMPONENT OF THE PAYMENT FOR OFFICE SPACE IS REPORTED ON LINE 2(3)

Schedule R (Form 990) 2017